

# **Fort Payne City Board of Education**

## **SUPPORT PERSONNEL – APPLICATION FOR EMPLOYMENT**

205 45<sup>th</sup> Street NE

Fort Payne, Alabama 35967

DATE \_\_\_\_\_ 20 \_\_\_\_\_

### **PERSONAL INFORMATION**

NAME \_\_\_\_\_  
(As shown on Social Security Card)

Are your college employment records etc. listed in another name? \_\_\_\_\_

PERMANENT

ADDRESS \_\_\_\_\_  
Street City State Zip Telephone

PRESENT

ADDRESS \_\_\_\_\_  
Street City State Zip Telephone

SOCIAL SECURITY NUMBER \_\_\_\_\_ CELL PHONE \_\_\_\_\_

### **EMPLOYMENT DESIRED**

Position desired: \_\_\_\_\_

When are you available to start work: \_\_\_\_\_

If you previously worked in the FPCS District what position did you hold \_\_\_\_\_

\*Aides must have two years of higher education or an Associate's degree or passing score on the WorkKeys

### **APPLICATION MUST BE UPDATED IN JANUARY OF EACH YEAR TO REMAIN CURRENT.**

THE FORT PAYNE CITY BOARD OF EDUCATION IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF AGE, RACE, COLOR, NATIONAL ORIGIN, RELIGION, SEX OR DISABILITY IN EDUCATIONAL PROGRAMS OR ACTIVITIES.

EDUCATION High School Graduate \_\_\_\_ GED \_\_\_\_ Vocational Training \_\_\_\_ Other \_\_\_\_

NAME OF SCHOOL AND LOCATION (include high school, college, additional studies)	DATES ATTENDED (month and year) From _____ To _____	Did You Graduate?	TYPE OF DIPLOMA/DEGREE

## EMPLOYMENT RECORD

DATES	POSITION	NAME & COMPLETE ADDRESS OF EMPLOYER	SUPERVISOR	REASON FOR LEAVING

If now employed, may we contact your present employer? \_\_\_\_\_

### ACTIVE MILITARY SERVICE:

Total military experience – Active Duty \_\_\_\_\_ Reserve \_\_\_\_\_  
Branch of Service \_\_\_\_\_ Date of Entry \_\_\_\_\_ Discharge Date \_\_\_\_\_  
Rank \_\_\_\_\_ Type of Discharge \_\_\_\_\_

### CONVICTIONS:

Have you been convicted by federal, state or other law enforcement authorities or pleaded nolo contendere for violation of any federal, state, county or municipal law, regulation or ordinance? Do not include anything that occurred before your eighteenth birthday or minor traffic violations for which a fine of \$100 or less was imposed. This would include, but is not limited to a felony, gross misdemeanor, misdemeanor, DUI, etc.? If needed, attach an explanation giving date, place and violation.

\_\_\_\_\_ YES \_\_\_\_\_ NO

Conviction for the following violations	Date	State	Disposition

Are you currently under investigation, or being named in an indictment, accusation, or special presentment of any offense, other than a minor traffic violation? \_\_\_\_\_

Are you under investigation, or have you been charged with any violation of the Alabama Code of Ethics for Education or any similar professional inquiry in any other state? \_\_\_\_\_

Have you been named by a state agency responsible for child welfare as a perpetrator in an indicated report of child abuse or neglect? \_\_\_\_\_

Have you had a report of child abuse or sexual activity involving a K-12 student or minor filed against you with a school district, a state or federal agency, a police agency, or in court? \_\_\_\_\_

*Please note that disclosure of prior criminal history will not automatically bar employment. If this section is not truthfully completed, you may be recommended for dismissal from employment.*

### MULTILINGUAL ABILITIES:

Language \_\_\_\_\_  
Abilities \_\_\_\_\_



**BACKGROUND INFORMATION:**

Are you a U.S. citizen or otherwise legally authorized to work in the U.S? \_\_\_\_\_  
Are you able to perform the essential functions of the position for which you are applying, with or without reasonable accommodations? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES/EMPLOYMENT VERIFICATION**

References should be persons who are qualified to provide information relative to your employment experiences(one of whom should be your current or last immediate supervisor). Each applicant should provide three (3) references.

Name	Position	Employer	Address	Phone
1.				
2.				
3.				

**PLEASE READ AND SIGN THE FOLLOWING STATEMENT:**

By filing an application for employment with the Fort Payne City School System, if employed, I agree to abide by all the policies as set forth by the Fort Payne City Board of Education and give consent to the representatives of the Fort Payne City School System to contact references, previous employers, physicians, hospitals, schools attended, court officials and law enforcement authorities. Also, I understand that any misstatement or omission of any information requested shall be a reason for non-renewal of contract or dismissal from employment.  
The application, transcript, references and other data are the property of the Fort Payne City School System and will not be returned to the applicant. This application will be classified as inactive after three (3) years unless updated every year.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**THE FORT PAYNE CITY BOARD OF EDUCATION REQUIRES A DRUG-FREE WORKPLACE**

<p><b>FOR OFFICE USE ONLY</b></p> <p>Date Interviewed: _____</p> <p>References Checked: _____</p> <p>Interviewed By: _____</p>
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## Voluntary Self Identification Form

The Fort Payne City School District is an Equal Opportunity/Affirmative Action Employer. We are a school system that values diversity. We are subject to certain federal equal employment record keeping requirements. In order to comply, we request applicants to voluntarily self-identify their race and ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

*Please check all that apply:*

☐ **I do not wish to Self-Identify**

**Gender**

☐ **Male**

☐ **Female**

☐ **Hispanic or Latino**

*A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.*

☐ **White** (not Hispanic or Latino)

*A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.*

☐ **Black or African American** (not Hispanic or Latino)

*A person having origins in any of the black racial groups of Africa.*

☐ **Native Hawaiian or Pacific Islander** (not Hispanic or Latino)

*A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.*

☐ **Asian** (not Hispanic or Latino)

*A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.*

☐ **American Indian or Alaska Native** (not Hispanic or Latino)

*A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.*

☐ **Two or More Races** (not Hispanic or Latino)

*All persons who identify with more than one of the above five races.*